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Table 1
Recommendation Status Summary

Assembly Budget Subcommittee 1: Health and Human Services		
Report Number 2011-113		
<i>Salinas Valley Memorial Healthcare System: Increased Transparency and Stronger Controls Are Necessary as It Focuses on Improving Its Financial Situation (March 2012)</i>		
RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To provide members of the public with opportunities to meaningfully participate in board meetings regarding executive compensation matters, and to hold the board accountable for its decisions on these matters, the Health Care System should develop a formal policy that establishes a process for determining executive compensation, including retirement benefits, that clearly documents all executive compensation decisions.	Fully Implemented	Salinas Valley Memorial Healthcare System
2. To provide members of the public with opportunities to meaningfully participate in board meetings regarding executive compensation matters, and to hold the board accountable for its decisions on these matters, the Health Care System should clearly indicate compensation matters on the agendas for its board meetings.	Fully Implemented	Salinas Valley Memorial Healthcare System
3. To provide members of the public with opportunities to meaningfully participate in board meetings regarding executive compensation matters, and to hold the board accountable for its decisions on these matters, the Health Care System should discuss executive compensation matters only in open sessions of board meetings, except in the limited circumstances that allow for discussion in closed sessions.	Fully Implemented	Salinas Valley Memorial Healthcare System
4. To ensure that the terms of its CEO's employment and compensation are clear, and to aid the board in its oversight role, the Health Care System should engage its next permanent CEO in a written employment contract.	Fully Implemented	Salinas Valley Memorial Healthcare System
5. To help reduce its operating costs and improve its overall financial situation, the Health Care System should continue to try to modify its employee benefits, such as paid time off, so they are aligned with industry practice.	Not Fully Implemented*	Salinas Valley Memorial Healthcare System
6. To ensure that the Health Care System, its board members, medical staff, employees, and consultants are engaged only in appropriate business relationships with respect to their economic interests, the Health Care System should engage an independent investigator to review the Health Care System's business relationships with entities that we identified as being economic interests of its board members and executives to determine whether any of the relationships violate applicable legal prohibitions and take appropriate corrective action if they do.	Fully Implemented	Salinas Valley Memorial Healthcare System
7. To ensure that the Health Care System, its board members, medical staff, employees, and consultants are engaged only in appropriate business relationships with respect to their economic interests, the Health Care System should implement the requirement in its recently updated conflict-of-interest policy that board members, medical staff, employees, and consultants disclose potential conflict-of-interest situations to their supervisors and the ethics and compliance officer, who shall review each situation and make a determination on the appropriate resolution.	Fully Implemented	Salinas Valley Memorial Healthcare System
8. To ensure that it has an up-to-date, approved conflict-of-interest code, the Health Care System should develop a protocol to file an action through the superior court to adopt a code if, in the future, the board of supervisors does not approve a code within six months of one being submitted to it by the Health Care System and if follow-up efforts with the board of supervisors prove unsuccessful.	Fully Implemented	Salinas Valley Memorial Healthcare System
9. To help ensure that individuals designated by the Health Care System as needing to file statements of economic interests do so, the Health Care System should amend its conflict-of-interest policy to specify an individual as its filing officer, in accordance with guidelines of the Fair Political Practices Commission.	Fully Implemented	Salinas Valley Memorial Healthcare System
10. To help ensure that individuals designated by the Health Care System as needing to file statements of economic interests do so, the Health Care System should amend its conflict-of-interest policy to delineate the steps its filing officer should take to ensure that all Health Care System board members, medical staff, employees, and consultants who are required to file statements of economic interests do so.	Fully Implemented	Salinas Valley Memorial Healthcare System

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RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
11. To help ensure that individuals designated by the Health Care System as needing to file statements of economic interests do so, the Health Care System should amend its conflict-of-interest policy to specify penalties for failure to file.	Fully Implemented	Salinas Valley Memorial Healthcare System
12. To help ensure the accuracy and completeness of filed statements of economic interests, the Health Care System's filing officer should follow state regulations for reviewing submitted statements, including verifying the cover sheet for completeness for all submitted statements.	Fully Implemented	Salinas Valley Memorial Healthcare System
13. To ensure that it is not making gifts of public funds, the Health Care System should develop and implement a policy and written procedures to demonstrate how funds it provides to support entities and programs in the community further the Health Care System's public purposes.	Fully Implemented	Salinas Valley Memorial Healthcare System
14. To help ensure that the Health Care System has the information it needs to comply with state regulations regarding public disclosure of the disposition of event tickets, the Health Care System should develop and implement a policy and written procedures for tracking its distribution of event tickets. The procedures should ensure that the Health Care System follows state requirements for making pertinent public disclosures.	Fully Implemented	Salinas Valley Memorial Healthcare System
15. To increase the transparency of its processes for awarding contracts that are not required by law to be selected using a competitive process, the Health Care System should require its employees to fully document the steps they take in selecting contractors and to describe how the selections result in the best value to the Health Care System.	Fully Implemented	Salinas Valley Memorial Healthcare System

Report Number 2011-101.2

Los Angeles County Department of Children and Family Services: Management Instability Hampered Efforts to Better Protect Children (March 2012)

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that child abuse and neglect allegations receive timely resolution, the department should continue to monitor the status of its backlog of investigations but revise its policies and performance measures to no longer define the backlog as investigations over 60 days old. Rather, it should emphasize completing investigations within 30 days.	Fully Implemented	Los Angeles County Department of Children and Family Services
2. To ensure that child abuse and neglect allegations receive timely resolution, the department should assess whether it needs to permanently allocate more resources to investigate allegations of child abuse and neglect.	Not Fully Implemented*	Los Angeles County Department of Children and Family Services
3. To better ensure that inner-city regional offices are staffed by experienced social workers, the department should consider providing social workers with incentives to work in these areas or require them to remain in these offices for a period longer than the one year currently required.	Fully Implemented	Los Angeles County Department of Children and Family Services
4. To ensure that it is placing children only in safe homes, the department should measure its performance and adjust its practices to adhere to state law, which requires that all homes be assessed prior to the placement of the child.	Will Not Implement	Los Angeles County Department of Children and Family Services
5. To improve its process for placing children with a relative, the department should analyze the best practices used by other county child welfare services agencies for such placements. The department should then implement changes in its practices so that relatives and their homes are approved prior to placement, as required by state law.	Will Not Implement	Los Angeles County Department of Children and Family Services
6. To ensure that social workers have as much relevant information as possible when placing children and licensing homes, the department should report requisite allegations of abuse or neglect to the Department of Justice and the Department of Social Services' licensing division.	Fully Implemented	Los Angeles County Department of Children and Family Services
7. To fully benefit from its death review process, the department should implement the resulting recommendations.	Not Fully Implemented*	Los Angeles County Department of Children and Family Services
8. To provide effective leadership, the department director should form a stable executive team by filling the chief deputy director, senior deputy director, and other deputy director positions.	Fully Implemented	Los Angeles County Department of Children and Family Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
9. To create and communicate its philosophy and plans, the department should complete and implement its strategic plan.	Fully Implemented	Los Angeles County Department of Children and Family Services

Report Number 2012-105

Departments of Public Health and Social Services: Weaknesses in the Administration of the Child Health and Safety Fund and the State Children's Trust Fund Limit Their Effectiveness (November 2012)

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that it does not violate provisions of state law that prohibit contracts for services that state employees can perform, Public Health should establish that it has adequate justification to contract under Section 19130 (b), prior to submitting contracts to the Department of General Services for approval.	Fully Implemented	California Department of Public Health
2. To comply with state contracting laws and policies that protect the State's interest, Public Health should ensure that its staff do not allow contractors to work before the Department of General Services has approved the contracts.	Fully Implemented	California Department of Public Health
3. To comply with state contracting laws and policies that protect the State's interest, Public Health should ensure that its staff do not use service orders to circumvent the State's contracting policies.	Fully Implemented	California Department of Public Health
4. To comply with state contracting laws and policies that protect the State's interest, Public Health should recoup the overpayment made to the San Diego State University Research Foundation, if applicable.	Resolved	California Department of Public Health
5. To determine whether the appropriation to administer the Kids' Plates Program is sufficient, Public Health should continue its plans to evaluate the costs of the regional grants Request for Application process and its monitoring of the awards for fiscal year 2012-13. If Public Health determines that the appropriation is insufficient, it should seek an amendment to state law.	Fully Implemented	California Department of Public Health
6. To comply with the <i>State Contracting Manual</i> , if Public Health chooses to use contractors for the Kids' Plates Program, it should direct its staff to substantiate the expenditures contractors claim. For example, Public Health could ask the contractors to submit for review detailed records substantiating all or a sample of their invoices.	Fully Implemented	California Department of Public Health
7. To ensure that it is able to measure its progress toward fulfilling the requirements of the health and safety fund, Public Health should establish performance measurements for the Kids' Plates Program.	Partially Implemented	California Department of Public Health
8. To ensure that it is able to measure its progress toward fulfilling the requirements of the health and safety fund, Public Health should periodically assess its progress toward meeting its measureable outcomes.	Partially Implemented	California Department of Public Health
9. To ensure that the Office of Child Abuse Prevention (office) complies with the <i>State Contracting Manual</i> , Social Services should direct the office to substantiate the expenditures that grantees claim. For example, the office could ask the grantees to submit for review detailed records for all or a sample of their invoices.	Fully Implemented	Department of Social Services
10. To ensure that the office complies with the <i>State Contracting Manual</i> , Social Services should direct the office to recover the overpayment from the Children's Bureau of Southern California, if applicable.	Fully Implemented	Department of Social Services
11. To ensure that it uses trust fund moneys only for permissible uses, Social Services should direct its internal audits staff to periodically perform reviews of the trust fund expenditures.	Fully Implemented	Department of Social Services
12. To ensure that it uses trust fund moneys only for permissible uses, Social Services should revise its invoicing process to clearly identify the objectives in the scope of work section of its grant agreements and their corresponding funding sources.	Fully Implemented	Department of Social Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
13. To ensure compliance with the state law governing the trust fund that allows it to fund research and demonstration projects that explore the nature and incidence of child abuse and the development of long-term solutions to the problem of child abuse, Social Services should establish procedures to ensure that all grants it awards for research and demonstration projects clearly demonstrate a linkage to the trust fund's requirements.	Fully Implemented	Department of Social Services
14. To ensure that the office complies with the <i>State Contracting Manual</i> , Social Services should direct the office to update its guidelines for grant administration to establish a formal process for reviewing the grantees' progress reports and interim products. This process should include documenting the office's review and assessment of whether the grantees meet the goals, objectives, and measurable outcomes in their grant requirements.	Fully Implemented	Department of Social Services
15. To ensure that the office complies with the <i>State Contracting Manual</i> , Social Services should direct the office to retain the documentary evidence of its review and assessment in the grantee files.	Fully Implemented	Department of Social Services
16. To ensure that its efforts funded by the trust fund are preventing or reducing incidences of child abuse and neglect, Social Services should develop universal performance measurements for the trust fund.	Fully Implemented	Department of Social Services
17. To ensure that its efforts funded by the trust fund are preventing or reducing incidences of child abuse and neglect, Social Services should ensure that the performance measurements are reflected in the grants it awards.	Partially Implemented	Department of Social Services
18. To ensure that its efforts funded by the trust fund are preventing or reducing incidences of child abuse and neglect, Social Services should evaluate the performance measurements annually to assess whether the trust fund's programs and services are effective in reducing incidences of child abuse and neglect.	Partially Implemented	Department of Social Services
19. To ensure compliance with the state law that requires the office to publish certain trust fund information, Social Services should require the office to establish procedures to ensure inclusion on its Web site of all programs and services it funded using the trust fund.	Fully Implemented	Department of Social Services
20. To ensure compliance with the state law that requires the office to publish certain trust fund information, Social Services should require the office to publish on its Web site the amount in the trust fund as of June 30 each year.	Fully Implemented	Department of Social Services
21. To improve the presentation of the information it publishes for the trust fund, Social Services should establish a link that separately provides descriptions of the types of programs and services it funds using the trust fund and the target populations that benefit from the programs.	Fully Implemented	Department of Social Services
22. To improve the presentation of the information it publishes for the trust fund, Social Services should present the amount it disbursed from the trust fund in the prior fiscal year by the amount spent for each program or service.	Fully Implemented	Department of Social Services

Report Number 2012-111***California Department of Public Health: It Needs to Improve Accuracy in Accounting and Charging for Compliance Inspections Designed to Reduce Youth Access to Tobacco and It Could Enhance Its Compliance Inspections (June 2013)***

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that it can support its labor costs, Public Health should implement a process to accurately track the time its staff spends conducting statewide and local compliance inspections.	Fully Implemented	California Department of Public Health
2. It should allocate expenses associated with statewide and local compliance inspections to the appropriate funding source, based on the time staff spends conducting those activities, and it should maintain accurate accounting records to reflect actual costs of statewide and local compliance inspections.	Fully Implemented	California Department of Public Health
3. When Public Health enters into new contracts with local entities to conduct compliance inspections, it should evaluate its historical costs of conducting these inspections to ensure that the existing rates are adequate to recoup its costs. If it determines that the existing rates are not adequate, it should develop a new rate that accurately reflects its true costs.	No Action Taken	California Department of Public Health

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
4. When Public Health enters into new contracts with local entities to conduct compliance inspections, it should ensure that it maintains adequate documented support for the rate it charges for a compliance inspection.	No Action Taken	California Department of Public Health
5. Public Health should amend its recent contract with the city of Los Angeles to correct the rate it charges for a local compliance inspection to reflect its true cost.	No Action Taken	California Department of Public Health
6. To ensure that Public Health can more effectively monitor and enforce compliance with the STAKE Act, it should take appropriate steps to ensure that there are no restrictions placed on the use of the data acquired during the annual retailer assessment that would preclude its use for compliance inspection purposes.	No Action Taken	California Department of Public Health
7. To ensure that Public Health can more effectively monitor and enforce compliance with the STAKE Act, it should annually obtain the identifying information regarding the retailers that sold tobacco to minors during the annual retailer assessment and provide that information to the Food and Drug Branch.	No Action Taken	California Department of Public Health
8. To ensure that Public Health can more effectively monitor and enforce compliance with the STAKE Act, it should include the retailers that sold tobacco to minors during the annual retailer assessment when selecting the retailers it plans to inspect as part of the statewide compliance inspections.	No Action Taken	California Department of Public Health
9. Public Health should add language to its youth decoy and parent or legal guardian consent form to clarify that the data obtained from the youth's participation may be used in future research in a way that will not reveal the identity of the youth.	Fully Implemented	California Department of Public Health

Report Number 2012-107

Developmental Centers: Poor-Quality Investigations, Outdated Policies, Leadership and Staffing Problems, and Untimely Licensing Reviews Put Residents at Risk (July 2013)

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. The department should provide a reminder to staff about the importance of promptly notifying the Office of Protective Services (OPS) of incidents involving resident safety.	Fully Implemented	Department of Developmental Services
2. Within 60 days, the department should make the following amendments to its policies and procedures for OPS: <ul style="list-style-type: none"> Clarify who is responsible for deciding whether to make district attorney referrals. Clarify that the final decision to initiate a specialized medical examination for an alleged victim of sexual assault rests with OPS, not with health care staff. Require OPS investigators to document their efforts to communicate with alleged victims of abuse, including nonverbal clients, and require supervisors to verify that such efforts have been made when approving investigation reports. Direct its investigators to record the potential violations of law or facility policy they identify and consider during each investigation. 	Fully Implemented	Department of Developmental Services
3. To ensure adequate guidance to OPS personnel, once the department has amended OPS's policies and procedures to reflect the recommendations we have included here, the department and OPS should place a high priority on completing and implementing its planned updates to the OPS policy and procedure manual.	Pending	Department of Developmental Services
4. OPS should provide additional training to its law enforcement personnel on how to conduct an initial incident investigation, particularly regarding collection of written declarations and photographs of alleged victims following an incident.	Pending	Department of Developmental Services
5. To avoid jeopardizing the integrity of its criminal investigations with compelled statements acquired through administrative admonishments, the department should require that different OPS investigators conduct the administrative investigation and the criminal investigation when they involve the same incident.	Pending	Department of Developmental Services
6. As soon as possible, the department should hire a permanent OPS director and permanent OPS commanders that are highly qualified staff capable of performing the administrative functions these positions require.	Pending	Department of Developmental Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
7. To help ensure the quality of OPS investigations, the department should revise its OPS training policy to require its law enforcement personnel to attend annually specialized trainings that address their specific needs. At least initially, the department should focus the additional trainings on communicating with residents, writing effective investigative reports, and collecting investigative evidence. To further develop the leadership skills of OPS management, the department should consider having experienced or particularly skilled members of its OPS management provide this annual training.	Pending	Department of Developmental Services
8. To ensure that it has adequate numbers of staff to properly and promptly investigate developmental center incidents, the department should address the high number of vacancies within OPS by instituting a formal recruitment program in accordance with the guidance provided in the California State Personnel Board's Merit Selection Manual, as well as using input from OPS law enforcement personnel.	Pending	Department of Developmental Services
9. After the department has implemented a formal OPS recruiting program, if it can demonstrate that it is still having trouble filling vacant OPS positions, the department should evaluate how it can reduce some of the compensation disparity between OPS and the local law enforcement agencies with which it competes for qualified personnel.	Pending	Department of Developmental Services
10. To make certain that residents receive an adequate level of care and are protected from harm, the department should encourage Human Resources—which is responsible for negotiating labor agreements with employee bargaining units—to include provisions in future collective agreements to cap the number of voluntary overtime hours an employee can work and/or require departments to distribute overtime hours more evenly among staff. If, in the next round of negotiating bargaining unit agreements, Human Resources does not include provisions to cap the number of voluntary overtime hours an employee can work, the department should continue to advocate for these changes for future agreements. In the meantime, the department should adjust its overtime scheduling and monitoring practices to strengthen, where possible, procedures designed to ensure that staff working overtime do not compromise residents' health and safety.	Pending	Department of Developmental Services
11. To minimize the need for overtime, the department should reassess its minimum staffing requirements, hire a sufficient number of employees to cover these requirements, and examine its employee scheduling processes.	Pending	Department of Developmental Services
12. To ensure that staff who work overtime are paid the correct amount, developmental center management should require all staff to submit not only overtime approvals, but also the department's standardized form showing time off and overtime hours. Additionally, the department should establish a written guide to help ensure that timekeeping staff follow the overtime provisions of the various laws, regulations, and bargaining unit agreements.	Pending	Department of Developmental Services
13. The department should create specific measurable goals for OPS that include existing and new measures associated with each one, such as staffing, overtime, and the timely completion of investigations. In addition, the department should perform a regular review of the quality of OPS's activities and investigations to achieve those goals. The department should track progress in quality measures over time and adjust its training plans to increase OPS law enforcement personnel's skill and compliance with established policies and procedures.	Pending	Department of Developmental Services
14. To allow for the creation of consistent performance measures and comparisons of resident abuse data across all developmental centers, the department should ensure that each of its centers consistently uses the same data fields in IRIS.	Fully Implemented	Department of Developmental Services
15. To conduct licensing surveys at required intervals while minimizing additional workload, Public Health should explore further opportunities to coordinate the licensing and certification surveys. If Public Health questions the value of these surveys, it should seek legislation to modify the surveying requirements.	Pending	California Department of Public Health
16. To ensure that the facilities Public Health monitors take timely corrective action on deficiencies, Public Health should comply with the Centers for Medicare & Medicaid Services' (CMS) 45-day revisit requirement. If the 45-day revisit time frame is not possible due to the extent of the corrections required at particular facilities, Public Health should seek exemptions from CMS as appropriate. For facilities whose deficiencies are not severe enough to require an on-site revisit, Public Health should direct its staff to complete desk reviews within 60 days.	Fully Implemented	California Department of Public Health

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
17. To ensure that investigations are conducted on a timely basis across priority levels, Public Health should develop and implement target time frames for the priority levels that lack them. Public Health should ensure that the timelines are being met and, if not, explore new ways to increase efficiency and manage its workload, thereby facilitating timely investigations.	Will Not Implement	California Department of Public Health
18. To improve its enforcement, each year Public Health should evaluate the effectiveness of its enforcement system across all types of health facilities, including those in developmental centers, prepare the required annual report, and, if called for, recommend legislation to improve the enforcement system and enhance the quality of care.	Pending	California Department of Public Health

Report Number 2013-602

New High Risk Entity: Covered California Appears Ready to Operate California's First Statewide Health Insurance Exchange, but Critical Work and Some Concerns Remain (July 2013)

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To provide as much public transparency as possible, Covered California's board should formally adopt a policy to retain confidentiality only for contracts, contract amendments, and payment rates that are necessary to protect Covered California's interests in future contract negotiations.	Pending	Covered California
2. To comply with federal requirements, Covered California should develop a plan and procedures for monitoring, recertification, and decertification of qualified health plans.	Pending	Covered California
3. To ensure the success of its outreach effort, Covered California should track the effect on enrollment figures of its planned outreach and marketing activities and of its assister program.	Pending	Covered California
4. To ensure financial sustainability, Covered California should conduct regular reviews of enrollment, costs, and revenue and make prompt adjustments to its financial sustainability plan as necessary.	Pending	Covered California

Report Number 2012-122

Mental Health Services Act: The State's Oversight Has Provided Little Assurance of the Act's Effectiveness, and Some Counties Can Improve Measurement of Their Program Performance (August 2013)

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
1. To ensure that it monitors counties to the fullest extent as the MHSa specifies and that it implements best practices, Health Care Services should draft and enter into a performance contract with each county that contains assurances for effective oversight and furthers the intent of the MHSa, including demonstration that each of the county's MHSa programs are meeting the MHSa's intent.	Partially Implemented	Department of Health Care Services
2. To ensure that it monitors counties to the fullest extent as the MHSa specifies and that it implements best practices, Health Care Services should conduct comprehensive on-site reviews of county MHSa programs, including verifying county compliance with MHSa requirements.	Partially Implemented	Department of Health Care Services
3. To ensure that counties have the needed guidance to implement and evaluate their MHSa programs, Health Care Services should coordinate with the Accountability Commission and issue guidance or regulations, as appropriate, for Facilities programs and for other MHSa requirements, such as a prudent reserve.	Partially Implemented	Department of Health Care Services
4. To ensure that counties have the needed guidance to implement and evaluate their MHSa programs, Health Care Services should commence this regulatory process no later than January 2014.	Partially Implemented	Department of Health Care Services
5. To ensure that counties have the needed guidance to implement and evaluate their MHSa programs, Health Care Services should collaborate with the Accountability Commission to develop and issue guidance or regulations, as appropriate, to counties on how to effectively evaluate and report on the performance of their MHSa programs.	Pending	Department of Health Care Services
6. To ensure that Health Care Services and other state entities can evaluate MHSa programs and assist the Accountability Commission in its efforts, Health Care Services should collect complete and relevant MHSa data from the counties.	Pending	Department of Health Care Services

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
7. To ensure that Health Care Services and other state entities can evaluate MHSA programs and assist the Accountability Commission in its efforts, Health Care Services should resolve all known technical issues with the partnership and client services systems and provide adequate and expert resources to manage the systems going forward.	Partially Implemented	Department of Health Care Services
8. Health Care Services should, as soon as is feasible, revise or create a reasonable and justifiable allocation methodology to ensure that counties are appropriately funded based on their identified needs for mental health services. Health Care Services should ensure that it reviews the methodology regularly and updates it as necessary so that the factors and their weighting are appropriate.	Partially Implemented	Department of Health Care Services
9. To ensure that counties have needed guidance to implement and evaluate MHSA programs, the Accountability Commission should issue regulations, as appropriate, for Prevention and Innovation programs.	Partially Implemented	Mental Health Services Oversight and Accountability Commission
10. To ensure that counties have needed guidance to implement and evaluate MHSA programs, the Accountability Commission should commence the regulatory process no later than January 2014.	Partially Implemented	Mental Health Services Oversight and Accountability Commission
11. To fulfill its charge to evaluate MHSA programs, the Accountability Commission should undertake the evaluations specified in its implementation plan.	Partially Implemented	Mental Health Services Oversight and Accountability Commission
12. To ensure that it can fulfill its evaluation responsibilities, the Accountability Commission should examine its prioritization of resources as it pertains to performing all necessary evaluations.	Partially Implemented	Mental Health Services Oversight and Accountability Commission
13. To report on the progress of MHSA programs and support continuous improvement, the Accountability Commission should fully use the results of its evaluations to demonstrate to taxpayers and counties the successes and challenges of these programs.	Partially Implemented	Mental Health Services Oversight and Accountability Commission
14. The Planning Council should take steps to ensure that it annually reviews the overall effectiveness of MHSA programs in accordance with state law.	Partially Implemented	California Mental Health Planning Council
15. The Planning Council should document and make public the reviews that it performs of MHSA programs to demonstrate that it is performing all required reviews.	Partially Implemented	California Mental Health Planning Council
16. To improve the quality of county processes related to measuring program performance, Health Care Services should use its performance contracts with counties to ensure that they specify MHSA program goals in their plans and annual updates and include those same goals in their contracts with program providers.	Partially Implemented	Department of Health Care Services
17. To improve the quality of county processes related to measuring program performance, Health Care Services should use its performance contracts with counties to ensure that they identify meaningful data to measure the achievement of all their goals, set specific objectives, and require their program providers to capture those data so they can use the data to verify and report the effectiveness of their MHSA programs.	Partially Implemented	Department of Health Care Services
18. Health Care Services should develop standardized data collection guidelines or regulations, as appropriate, that will address inconsistencies in the data that counties report to the State. In developing these guidelines or regulations, Health Care Services should consult with the Accountability Commission to ensure that data collected reasonably fulfill statewide evaluation purposes.	Pending	Department of Health Care Services
19. To help ensure county compliance with stakeholder regulations, Health Care Services should provide technical assistance to counties on the MHSA local planning review process and ensure that its guidance to counties is clear and consistent with state regulations.	Pending	Department of Health Care Services
20. Santa Clara County should review its existing MHSA contracts and by December 31, 2013, or as soon as is feasible, amend them as necessary to include plan goals.	Partially Implemented	Santa Clara County Mental Health Department
21. Santa Clara County should ensure that all MHSA invoices are adequately supported with information that demonstrates that MHSA services were provided.	Pending	Santa Clara County Mental Health Department

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
22. Sacramento County should review its existing MHSA contracts and by December 31, 2013, or as soon as is feasible, amend them as necessary to include plan goals.	Partially Implemented	County of Sacramento Department of Health and Human Services
23. San Bernardino County should review its existing MHSA contracts and by December 31, 2013, or as soon as is feasible, amend them as necessary to include plan goals.	Partially Implemented	County of San Bernardino Department of Behavioral Health Administration

Report Number 2013-103
Armed Persons With Mental Illness: Insufficient Outreach From the Department of Justice and Poor Reporting From Superior Courts Limit the Identification of Armed Persons With Mental Illness (October 2013)

RECOMMENDATION	STATUS OF RECOMMENDATION	ENTITY
19. To ensure that all applicable information from State Hospitals is communicated to Justice, by March 31, 2014, Justice and State Hospitals should establish a written understanding of the method and frequency with which State Hospitals will report prohibited individuals to Justice.	Partially Implemented	Department of State Hospitals

* Prior to 2014-406, this special report to the Assembly and Budget Subcommittees only reflected the entities' 60-day, six-month, or one-year responses. Beginning this year, we are reporting the most current response we have on file. For audits released between January and October 2012, this may include the entities' annual follow-up responses, which were previously published in our January 2014 report, *Recommendations Not Fully Implemented After One Year: The Omnibus Audit Accountability Act of 2006*. The status comments for these annual follow-up responses only include Fully Implemented, Resolved, Not Fully Implemented, and Will Not Implement.